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CONFIRMATION NO. 1208

<b>SERIAL NUMBER</b> 10/017,213	<b>FILING OR 371(c) DATE</b> 12/14/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> S13.12-0111
<b>APPLICANTS</b> Scott R. Smith, Chaska, MN;				
<b>** CONTINUING DATA *****</b> (NONE) PHU				
<b>** FOREIGN APPLICATIONS *****</b> (NONE) PHU				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 03/20/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 85
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 26181				
<b>TITLE</b> Recanalization of occluded vessel using magnetic resonance guidance				
<b>FILING FEE RECEIVED</b> 1910	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	